



Rep. Pamela Reaves-Harris

Filed: 3/28/2016

09900HB0854ham001

LRB099 04676 MJP 46423 a

1 AMENDMENT TO HOUSE BILL 854

2 AMENDMENT NO. _____. Amend House Bill 854 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Emergency Medical Services (EMS) Systems
5 Act is amended by changing Section 32.5 as follows:

6 (210 ILCS 50/32.5)

7 Sec. 32.5. Freestanding Emergency Center.

8 (a) The Department shall issue an annual Freestanding
9 Emergency Center (FEC) license to any facility that has
10 received a permit from the Health Facilities and Services
11 Review Board to establish a Freestanding Emergency Center by
12 January 1, 2015, and:

13 (1) is located: (A) in a municipality with a population
14 of 50,000 or fewer inhabitants; (B) within 50 miles of the
15 hospital that owns or controls the FEC; and (C) within 50
16 miles of the Resource Hospital affiliated with the FEC as

1 part of the EMS System;

2 (2) is wholly owned or controlled by an Associate or
3 Resource Hospital, but is not a part of the hospital's
4 physical plant;

5 (3) meets the standards for licensed FECs, adopted by
6 rule of the Department, including, but not limited to:

7 (A) facility design, specification, operation, and
8 maintenance standards;

9 (B) equipment standards; and

10 (C) the number and qualifications of emergency
11 medical personnel and other staff, which must include
12 at least one board certified emergency physician
13 present at the FEC 24 hours per day.

14 (4) limits its participation in the EMS System strictly
15 to receiving a limited number of BLS runs by emergency
16 medical vehicles according to protocols developed by the
17 Resource Hospital within the FEC's designated EMS System
18 and approved by the Project Medical Director and the
19 Department;

20 (5) provides comprehensive emergency treatment
21 services, as defined in the rules adopted by the Department
22 pursuant to the Hospital Licensing Act, 24 hours per day,
23 on an outpatient basis;

24 (6) provides an ambulance and maintains on site
25 ambulance services staffed with paramedics 24 hours per
26 day;

1 (7) (blank);

2 (8) complies with all State and federal patient rights
3 provisions, including, but not limited to, the Emergency
4 Medical Treatment Act and the federal Emergency Medical
5 Treatment and Active Labor Act;

6 (9) maintains a communications system that is fully
7 integrated with its Resource Hospital within the FEC's
8 designated EMS System;

9 (10) reports to the Department any patient transfers
10 from the FEC to a hospital within 48 hours of the transfer
11 plus any other data determined to be relevant by the
12 Department;

13 (11) submits to the Department, on a quarterly basis,
14 the FEC's morbidity and mortality rates for patients
15 treated at the FEC and other data determined to be relevant
16 by the Department;

17 (12) does not describe itself or hold itself out to the
18 general public as a full service hospital or hospital
19 emergency department in its advertising or marketing
20 activities;

21 (13) complies with any other rules adopted by the
22 Department under this Act that relate to FECs;

23 (14) passes the Department's site inspection for
24 compliance with the FEC requirements of this Act;

25 (15) submits a copy of the permit issued by the Health
26 Facilities and Services Review Board indicating that the

1 facility has complied with the Illinois Health Facilities
2 Planning Act with respect to the health services to be
3 provided at the facility;

4 (16) submits an application for designation as an FEC
5 in a manner and form prescribed by the Department by rule;
6 and

7 (17) pays the annual license fee as determined by the
8 Department by rule.

9 (a-5) Notwithstanding any other provision of this Section,
10 the Department may issue an annual FEC license to a facility
11 that is located in a county that does not have a licensed
12 general acute care hospital if the facility's application for a
13 permit from the Illinois Health Facilities Planning Board has
14 been deemed complete by the Department of Public Health by
15 January 1, 2014 and if the facility complies with the
16 requirements set forth in paragraphs (1) through (17) of
17 subsection (a).

18 (a-10) Notwithstanding any other provision of this
19 Section, the Department may issue an annual FEC license to a
20 facility if the facility has, by January 1, 2014, filed a
21 letter of intent to establish an FEC and if the facility
22 complies with the requirements set forth in paragraphs (1)
23 through (17) of subsection (a).

24 (a-15) Notwithstanding any other provision of this
25 Section, the Department shall issue an annual FEC license to a
26 facility if the facility: (i) discontinues operation as a

1 hospital within 180 days after the effective date of this
2 amendatory Act of the 99th General Assembly with a Health
3 Facilities and Services Review Board project number of
4 E-017-15; (ii) has an application for a permit to establish an
5 FEC from the Health Facilities and Services Review Board that
6 is deemed complete by January 1, 2017; and (iii) complies with
7 the requirements set forth in paragraphs (1) through (17) of
8 subsection (a) of this Section.

9 (a-20) Notwithstanding any other provision of this
10 Section, the Department shall issue an annual FEC license to a
11 facility located within a municipality with a population in
12 excess of 1,000,000 inhabitants if the facility has, by January
13 1, 2017, filed a letter of intent to establish an FEC and if
14 the facility complies with all requirements set forth in
15 paragraphs (3) through (17) of subsection (a) of this Section
16 and all applicable administrative rules. Any FEC located in a
17 municipality with a population in excess of 1,000,000
18 inhabitants shall not be required to be wholly owned or
19 controlled by an Associate Hospital or Resource Hospital;
20 however, all patients needing emergent or urgent evaluation or
21 treatment beyond the FEC's ability shall be expeditiously
22 transferred to the closest appropriate health care facility
23 based on the patient's acuity and needs. For non-emergent
24 patients ultimately needing inpatient hospital care, the FEC
25 shall have a transfer agreement in place with at least one
26 acute care hospital in the FEC's service area. For FECs

1 established under this subsection (a-20), the facility shall
2 have the authority to create up to 10 observation beds as
3 further defined by rule. The Department shall issue no more
4 than 3 such licenses in a municipality with a population in
5 excess of 1,000,000 inhabitants and shall give consideration to
6 underserved areas, particularly those that have recently lost
7 access to emergency care through the loss of an emergency care
8 provider. An FEC qualifying under this subsection (a-20) shall
9 fully participate with and function within a Department
10 approved local EMS System.

11 (b) The Department shall:

12 (1) annually inspect facilities of initial FEC
13 applicants and licensed FECs, and issue annual licenses to
14 or annually relicense FECs that satisfy the Department's
15 licensure requirements as set forth in subsection (a);

16 (2) suspend, revoke, refuse to issue, or refuse to
17 renew the license of any FEC, after notice and an
18 opportunity for a hearing, when the Department finds that
19 the FEC has failed to comply with the standards and
20 requirements of the Act or rules adopted by the Department
21 under the Act;

22 (3) issue an Emergency Suspension Order for any FEC
23 when the Director or his or her designee has determined
24 that the continued operation of the FEC poses an immediate
25 and serious danger to the public health, safety, and
26 welfare. An opportunity for a hearing shall be promptly

1 initiated after an Emergency Suspension Order has been
2 issued; and

3 (4) adopt rules as needed to implement this Section.

4 (Source: P.A. 99-490, eff. 12-4-15.)".